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		lock I for any change of address)		Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
1420 K Street, N Suite 400	NTOS & HANSO N.W.	PATE	B 1 6 2010 20 1 S	C	tificate of Mailing or T	t .		
WASHINGTON	N, DC 20005	A T	PADEMARKOR	(Depositor's name)				
						(Signature)		
			L			(Date)		
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENT	OR	ATTORNEY DOCKET N	IO. CONFIRMATION NO.		
10/511,450	10/27/2004		-Yatsuhari Yokota		031265	6160		
TITLE OF INVENTION	I: <del>REFLOW SOLDERN</del>	IG DEVICE	Yatsuhar <u>u</u> Y	okota (				
REFLO	W SOLDERING A	PPARATUS						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSU	E FEE TOTAL FEE(S)	DUE DATE DUE		
nonprovisional	YES	\$755	\$300	\$0	\$1055	02/18/2010		
EXAMINER ART UNIT		ART UNIT	CLASS-SUBCLASS	02/17/2	010 AWONDAF2 000001	101 012340 10511450		
ABOAGYE	, MICHAEL	1793	228-043000	01 FC:2 02 FC:1	)A			
FR 1.363).	ence address or indication		2. For printing on the patent from \$150.001  (1) the names of up to 3 registered patent attorneys					
"Fee Address" ind	condence address (or Cha B/122) attached. dication (or "Fee Address D2 or more recent) attach	" Indication form	(2) the mamp of a sig	arme of a single firm (having as a member a and attorney or agent) and the names of up to the datent attorneys or agents. If no name is a name will be printed.				
DI EASE NOTE: Uni	less an assignee is ident h in 37 CFR 3.11. Com	A TO BE PRINTED ON T ified below, no assignee oletion of this form is NO	data will annear on the	patent. If an assign an assignment.		the document has been filed for		
YOKOTA	TECHNICA LIM	ITED COMPANY	Hachioji-	shi, Tokyo,	Japan			
lease check the appropri	iate assignee category or	categories (will not be pr	inted on the patent):	🔲 Individual 😡 Co	orporation or other priva	te group entity Government		
<u></u> "	o small entity discount p		4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.					
Advance Order - # of Copies			The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 01-2340 (enclose an extra copy of this form					
a. Applicant claims	tus (from status indicated s SMALL ENTITY statu	is. See 37 CFR 1.27.			LL ENTITY status. See			
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Authorized Signature	Tiguell	W.		Date Fe	bruary 16, 20	010		
Typed or printed name		Harison		Registration N				
nis collection of information application. Confident	ation is required by 37 C iality is governed by 35	FR 1.311. The informatio U.S.C. 122 and 37 CFR	n is required to obtain of 1.14. This collection is	r retain a benefit by t estimated to take 12 i	he public which is to file minutes to complete, inc	e (and by the USPTO to process) cluding gathering, preparing, and of time, you require to complete		

Th an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 immediate the amount of time you require to complete submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete submitting the completed application for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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		lock I for any change of address)	Fee	s) Transmittal, Thi	s certificate ca	nnot be used for	domestic mailings of the any other accompanying or formal drawing, must		
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WASHINGTON	, DC 20005	4	PADEMARK OFF				(Depositor's name)		
							(Signature)		
				<u></u>			(Date)		
APPLICATION NO.	. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.		
10/511,450	10/27/2004		-Yatsuhari Yokota	···········	031265		6160		
TITLE OF INVENTION	REFLOW SOLDERIN	IG-DEVICE	Yatsuhar <u>u</u> Yo	kota					
REFLO	W SOLDERING A	PPARATUS							
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nonprovisional	YES	\$755	\$300	\$0		\$1055	02/18/2010		
EXAM	INER	ART UNIT	CLASS-SUBCLASS						
ABOAGYE, MICHAEL 1793		1793	228-043000	,					
. Change of corresponde	ence address or indication	n of "Fee Address" (37	2. For printing on the p			KRATZ.	QUINTOS &		
CFR 1.363).  Change of correspondence address (or Change of Correspondence			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  HANSON, LLP						
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
Number is required.									
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		oletion of this form is NO	data will appear on the part a substitute for filing an			,			
(A) NAME OF ASSIC	GNEE ·		(B) RESIDENCE: (CITY	and STATE OR C	OUNTRY)	•			
	TECHNICA LIM ate assignee category or		Hachioji-si			ther private grou	p entity Government		
a. The following fee(s) a		•	o. Payment of Fee(s): (Plea						
Issue Fee	ire subfinited.	70	A check is enclosed.	se mot reapply an	., p ,		,		
	o small entity discount p	permitted)	Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 01-2340 (enclose an extra copy of this form).						
Advance Order - #	of Copies 2		overpayment, to Depor	sit Account Number	ge the required or 01-234	(enclose an	extra copy of this form).		
	us (from status indicates SMALL ENTITY statu		☐ b. Applicant is no long	ger claiming SMAL	LL ENTITY sta	atus. See 37 CFF	R 1.27(g)(2).		
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Typed or printed name	·	Harison		Registration N					
his collection of informs	tion is required by 37 C	FR 1 311 The information	n is required to obtain or r	etain a benefit by the	he nublic which	h is to file (and h	by the USPTO to process)		

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